	ru ro		Union
FOR INSTRUCTIONS, SEE BACK OF FORM	FILED	FORM	
DISCLOSURE SUMMARY PAGE	DEC 3 0 2002 pm.	DR-2 (Rev. 01/98)	DISCLOSURE REPORT
	SANDY HYSFLL	For Office Use O	17463 A
COMMITTERNAME (Must be same as on Statement of Organization of the same as on Statement of Organization of Organiz	ANOGIVITY AUDITOR	Comm. #	11100 11
	(VIV) JAVIVE		
IMPORTANT: Indicate type of committee you are reporting for:		Computer	<u>&amp;</u>
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) Cc (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central (8) Support State of Candidates	ounty/Local Candidate Committee		
(N/ Cellisten Druce 64)	1.782-9959	/型-	3-02
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE	DATES	IGNED
Routine Penalties Due For Late File	d Reports Range from \$	29 to \$5000	LONE BOARD
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOL	LOWING SENTENCE:	/ DEC 3	7 2
I AM FILING A Jan. 19-2003 REP	ODT FOR ANYA (4) EL FOTION	F11600	1 2002
(report date)	Indicate o		TION YEAR.
CHECK IF AMENDMENT TO REPORT DATED	Local C	ommittees, enter D	
First this is final (to miss time)	County	# Local Committee	
Check if this is final (termination) report and attach Notice of Disso (You must continue to file reports until a Notice of Dissolution		lection is held	is, enter county in
	L	MINI	
STATEMENT OF C	e total		
of all monies held by the committee. This amount MUST be same as the cash on hand at the end of the last reporting pe or must be zero if this is first report filed.)	the griod,		)
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule A) .	••••	717	.81
Schedule F: Loans Received total (Attach Schedule F)			0
Schedule H: Total Sales of Campaign Property (Attach Sche	edule H)		0
(Schedule H applies to Candidates' Committees	Only)		- 0 1
	SUB-TOTAL	7/	1.8/
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		- /	2 01
Schedule B: Expenditures total (Attach Schedule B)			- 8/
Schedule F: Loan Repayments total (Attach Schedule F)	•••••••••••••••••••••••••••••••••••••••		$\cup$
CASH ON HAND at the end of this reporting period (if final report, bal	ance must		$\alpha$
be zero) (Attach DR-3)	\$		<u> </u>
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$		(2
UNPAID BILLS (From Schedule D - Attach Schedule D)			0
UNPAID BILLS (From Schedule D - Attach Schedule D)	<b>\$</b>		0
IN KIND CONTRIBUTIONS (From Schedule $\Xi$ - Attach Schedule $\Xi$ )	<b>\$</b>		0 0 0
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	<b>\$</b>		0 0 0 s <u>X</u> no
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)  OUTSTANDING LOANS (From Schedule F - Attach Schedule F)  CANDIDATE COMMITTEES ONLY:	s	YE	0 0 0 s <u>X</u> no

For Instructions, See Back of Form

## CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NA	ME (Must be sai	me as on Statemen	nt of Organization)
Com 1	n) Her	to ele	of Cust Turner

SCHEDULE A (Rev. 08/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	NUMBER				INCOME
11-1-07	ID#	Union Co. Republican Party  Curt Turner st  Goz scherry st  Creston IA 5080/		\$ 400	
3	ID#	1. + Tunner	4 4 4		
10-16-12	CK#	Crecton the SD 801	land date	3/7-8/	
	ID#	4 = 1071, 21, 2000		77701	
•	CK#				
ž	ID#				
	CK#				
	ID#				
<del>-</del>	CK#				
	ID#	_			
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
			CUD TOTAL		

SUB-TOTAL

TOTAL (if last page of this schedule)

s 717-8/

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the sommittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_\_ of \_\_\_\_

FOR INSTRUCTIONS. SEE BACK OF FORM

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	NUMBER			1
	ID#	125113 Am- FM	Radio advertisen	sent,
10-16-02	CK#	Creston FA	Radio advertisen 10-16-02 to 4-5-02 Newspaper ads	\$ 471 50
. 7	ID#	Crestor	Nouse Paper ads	2 - 71
10-17-02	CK#	News Hovertiser Creston IA	1020017	102ml 7
16-01-02	ID#	11		125.57
	CK#			
10-31	ID#	aften Star-anter	prise 1	
	CK#	aften Star-anter aften, IA 50830	·	18.00
	.ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
L	<u> </u>	<u> </u>	<u> L</u>	

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 717.81

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page \_\_\_\_\_\_ of \_\_\_\_\_

COMMITTEE NAME (Must be same as on Statement of Organization)  Committee to elect Cart Turner						ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.			
	NG INVENTORY OF				ES OR TRANSFERS OF CAMPAIGN	I PROPERTY **		CK THIS E	
Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR) 4	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report	Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value o Donatio
pate purds	signs 57	797,72	700						
10-11									
				,					
	PAIGN PROPERTY THIS F	REPORT			TY SALES & TRANSFERS TOTAL FER TO SUMMARY PAGE) \$	тот	ALS S	! :!	\$

SCHEDULE